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TELEPHONE (312) 258-5500

SCHIFF HARDIN LLP

PATENT DEPARTMENT
6600 SEARS TOWER
233 SOUTH WACKER DRIVE
CHICAGO, ILLINOIS 60606
GROUP ART UNIT: 3762

In re application of: Anders Björling

SERIAL NO.: 09/993,156

EXAMINER: Joseph S. Machuga

FILED: November 19, 2001

CONFIRMATION NO.: 3762

TITLE: CARDIAC STIMULATING DEVICE WITH MORPHOLOGY SENSITIVE DETECTION AND METHOD FOR AUTOMATICALLY CREATING A MORPHOLOGY TEMPLATE"

AMENDMENT "A

MAIL STOP NON-FEE AMENDMENT

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450
SIR:

RECEIVED
MAY 21 2004

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below.

TECHNOLOGY CENTER 3700

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	40*	MINUS	**40	X	() X 9.00 () X 18.00	
INDEP. CLAIMS	2*	MINUS	3	X	() X 40.00 () X 84.00	
Application amended to contain any multiple dependent claims not previously paid for.				() YES () NO	() \$140.00 () \$280.00 ONE TIME	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0.00

- ** If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 write "20" in this space.
- ☐ Applicants petition the Commissioner of Patents and Trademarks to extend this time for response to the Office Action dated for ___ months so that the period for response is extended to _____. A check in the amount of \$ _____ is attached to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to deposit Account No. 501519. A duplicate copy of this sheet is enclosed.
 - ☐ A check in the amount of \$ _____ is attached.
 - ☐ A check for \$ _____ accompanying IDS under 37 CFR 1.97(c) is attached
 - ☐ A check for \$ _____ and Petition for Consideration of IDS under 37 CFR 1.97(d) is attached.
 - ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to account No. 501519. A duplicate of this sheet is enclosed.
- When phoning re this application, please call (312) 258-5500.

SCHIFF HARDIN LLP (Customer Number: 26574)

BY Steven H. Noll (28,982)

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on May 13, 2004

Steven H. Noll
NAME OF APPLICANT'S ATTORNEY
Steven H. Noll
SIGNATURE
May 13 2004
DATE